

DECLARATION AND POWER OF ATTORNEY

As below named inventors, we hereby declare that:

Our residence, post office address and citizenship are as stated below next to our names.

We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled **METHOD AND APPARATUS FOR DECREASING THE DROWSINESS OF AN INDIVIDUAL**, the specification of which is filed herewith.

We hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims.

We acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

We hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulation, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<u>60/083,284</u> (Application Serial No.)	<u>04/28/98</u> (Filing Date)	<u>Pending</u> (Status)	(Patented, Pending, Abandoned)
<u> </u> (Application Serial No.)	<u> </u> (Filing Date)	<u> </u> (Status)	(Patented, Pending, Abandoned)
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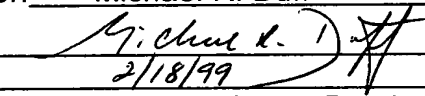
We hereby appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

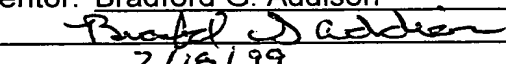
Paul J. Maginot, Registration No. 34,984
Bradford G. Addison, Registration No. 41,486
Harold C. Moore, Registration No. 37,892
Jeffrey B. Huter, Registration No. 41,086
Shawn D. Bauer, Registration No. 41,603

Address all telephone calls to: Bradford G. Addison at (317) 638-2922


Address all correspondence to: Maginot, Addison & Moore
Bank One Center/Tower
111 Monument Circle, Suite 3000
Indianapolis, Indiana 46204

We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first co-inventor: Michael R. Duff
Inventor's signature: 
Date: 2/18/99
Residence: 5854 TC Steele Road
Nashville, Indiana 47448
Citizenship: United States of America
Post Office Address: same as above

Full name of second co-inventor: Bradford G. Addison
Inventor's signature: 
Date: 2/18/99
Residence: 6115 Crittenden Avenue
Indianapolis, Indiana 46220
Citizenship: United States of America
Post Office Address: same as above

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 Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

STATEMENT BY A NON-INVENTOR SUPPORTING A CLAIM BY ANOTHER FOR SMALL ENTITY STATUS	Docket Number (Optional) 1519-0001
Applicant, Patentee, or Identifier: <u>Michael R. Duff et al.</u>	
Application or Patent No.: <u>To be assigned</u>	
Filed or Issued: <u>Herewith</u>	
Title: <u>Method and Apparatus for Decreasing the Drowsiness of an Individual</u>	
I hereby state that I am making this statement to support a claim by <u>Michael R. Duff</u> for small entity status for purposes of paying reduced fees to the United States Patent and Trademark Office, regarding the invention described in:	
<input checked="" type="checkbox"/> the specification filed herewith with title as listed above. <input type="checkbox"/> the application identified above. <input type="checkbox"/> the patent identified above.	
I hereby state that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying fees to the United States Patent and Trademark Office, if I had made the above identified invention.	
I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). Note: Separate statements are required from each person, concern or organization having rights to the invention to their status as small entities. (37 CFR 1.27)	
Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:	
<input checked="" type="checkbox"/> no such person, concern, or organization exists. <input type="checkbox"/> each such person, concern, or organization is listed below.	
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))	
NAME OF PERSON SIGNING <u>David C. Duff</u>	
TITLE IN ORGANIZATION OF PERSON SIGNING _____	
ADDRESS OF PERSON SIGNING <u>315 W. Gordon Pike #115 Bloomington, IN 47403</u>	
SIGNATURE <u></u>	DATE <u>2/18/99</u>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Applicant or Patentee: Michael R. Duff Attorney Docket No: 1519-0001
Appl. or Patent No.: to be assigned
Filed or Issued: filed herewith
For: Method and Apparatus for Decreasing the Drowsiness of an Individual

**Verified Statement (Declaration) Claiming Small Entity Status
(37 C.F.R. §§ 1.9(c) and 1.27(b)) - Independent Inventor**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 C.F.R. § 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, with regard to the invention entitled Method and Apparatus for Decreasing the Drowsiness of an Individual described in

☒ the specification filed herewith
☐ application no. _____, filed _____
☐ patent no. _____, issued _____

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 C.F.R. § 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 C.F.R. § 1.9(d) or a nonprofit organization under 37 C.F.R. § 1.9(e).

Each person, concern or organization to which I have assigned, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

☐ no such person, concern, or organization
☒ persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. § 1.27)


NAME David C. Duff
ADDRESS 315 W. Gordon Pike #115, Bloomington, Indiana 47403
(X) INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

NAME _____
ADDRESS _____
() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Michael R. Duff
Name of Inventor

 Date: 2/18/99
Signature of Inventor

Applicant or Patentee: Bradford G. Addison Attorney Docket No: 1519-0001
Appl. or Patent No.: to be assigned
Filed or Issued: filed herewith
For: Method and Apparatus for Decreasing the Drowsiness of an Individual

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☒ the specification filed herewith
☐ application no. _____, filed _____
☐ patent no. _____, issued _____

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☒ persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. § 1.27)

NAME Michael R. Duff
ADDRESS 5854 T C Steele, Nashville, Indiana 47448
(X) INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

NAME _____
ADDRESS _____
() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

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Bradford G. Addison
Name of Inventor

Bradford G. Addison Date: 2/18/99
Signature of Inventor